PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

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	Attorney Docket Number			
DECLARATION FOR UTILITY OR DESIGN	First Named Inv ntor	BUCKNER LYNN A.		
PATENT APPLICATION (37 CFR 1.63)	COMPLETE IF KNOWN			
	Application Numb r			
Declaration Submitted With Initial Filing  Declaration Submitted after Initial Filing (37 CFR 1.16 (e)) required)	Filing Date			
	Art Unit			
	Examiner Name			

	required)	CACITITION NUMBER					
As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Magnetic Head wear, Hat Sweat Band or Eye Glasses with Thermo Electric Cooler or Heater							
(Title of the Invention) the specification of which							
is attached hereto							
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and any amendment specifically referred to		of the above identified specif	fication, including t	he claims, as amended by			
t acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
Provisional	2						
60/394,300	USA	07/09/02					
Additional foreign application	mborn are lieted as a second	omental priority data at a - 1.5	TO/SD/02B offset	l l l l l l l l l l l l l l l l l l l			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## **DECLARATION** — Utility or D sign Pat nt Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below							
Name LYNN A. BUCKNER							
Address P.O. Box 609							
city (hickamauga		State	GA.	zip 30707			
	phone 706	.93	1.2125	706.931. Fax 2159			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) LYNN A. Family Name or Surname			VER				
Inventor's Lynn A. Buckse				Date 29 June 03			
Residence: City ChiCkamauga	State 6A	÷	Country USA	Citizenship USA			
Mailing Address P. O. Box (e09							
city Chickamauga	State GA		ZIP 30707	Country USA			
NAME OF SECOND INVENTOR:	A petition ha	s been	filed for this unsigne	ed inventor			
Given Name (first and middle [if any]) Family Name or Surname							
Inventor's Signature			Date				
Residence: City	State		Country	Citizenship			
Mailing Address							
•							
City	State		ZIP	Country			
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							